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COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD FOR DETECTING INCREASED SUSCEPTIBILITY TO TUMORS

the specification of which was filed on December 14, 2004 as United States application Serial No. 10/518,317.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority	Ciaimed
102 28 081.9 / (Number)	Germany / (Country)	18 June 2002 (Day/Month/Yr. Filed)	☑ yes	□ no
I hereby claim the benefit under listed below.	- 35 U.S.C. § 119(e) of	any United States Provisiona	l Applicat	tion(s)
(Application Serial No.)	(Filing Date)			
I hereby claim the benefit under listed below and, insofar as the in the prior United States applic States Code, §112, I acknowled Code of Federal Regulations, § and the national or PCT interna	subject matter of each cation in the manner proge the duty to disclose 1.56(a) which occurred	of the claims of this application of the claims of this application of the claims of t	on is not o of Title 3: led in Title	disclosed 5, United = 37,
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, aba	— ndoned)	

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint

Practioners Associated with the 27387 > Customer Number: as my/our attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. DIRECT TELEPHONE CALLS TO: (212) 808-0700 Bruce S. Londa 107) FULL NAME OF SOLE OR FIRST INVENTOR: DATE: 14.11.2001 INVENTOR'S SIGNATURE:__ RESIDENCE: Pohlandplatz 2. Dresden 01309 GERMANY DEX CITIZENSHIP: GERMAN L POST OFFICE ADDRESS: SAME AS ABOVE FULL NAME OF SECOND INVENTOR: Helge TAUBERT DATE: INVENTOR'S SIGNATURE:___ CITIZENSHIP: GERMAN RESIDENCE: Wiese 14, Grossomer 06348 GERMANY POST OFFICE ADDRESS: <u>SAME AS ABOVE</u> FULL NAME OF THIRD INVENTOR: Timo HILLEBRAND INVENTOR'S SIGNATURE: DATE: RESIDENCE: Bogenstr. 29, Honow 15366 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: <u>SAME AS ABOVE</u> FULL NAME OF FOURTH INVENTOR: Peter BENDZKO INVENTOR'S SIGNATURE:___ DATE: RESIDENCE: Ifflandstr. 32, Berlin 12623 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: SAME AS ABOVE

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NORRIS MCLAUGHLIN

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	FOWER OF ATTORNEY: As a named inv	entar, I hereby appoint	:	
	Practioners Associated with the Customer Number:	2738		
: •.	as my/our attorney(s) and/or agent(s) to pro Patent and Trademark Office connected the	secure this application a rewith.	nd transact all business in the	
	The undersigned hereby authorizes the Universations from the Assignee of this applicated Trademark Office regarding this applicator, agent and the undersigned.	cation as to any action to	be taken in the United States Pater	
	DIRECT TELEPHONE CALLS TO: Brace S. Londa (212) 80	8-0700		
	END I NAME OF COLO OR STREET BOARD			
	FULL NAME OF SOLE OR FIRST INVEITABLE SIGNATURE:			
*	RESIDENCE: Poblandulate 2. Dreaden 01		DATE:	
• • •	POST OFFICE ADDRESS: SAME AS A		CITIZENSHIP: GERMAN	
911	Direct Calabar on an analysis			
000	PHYENTOR'S SIGNATURE:	HolgeTAUBERT		
			DATE: 15.41.05	
	POST OFFICE ADDRESS: SAME AS A	BOVE	CITIZENSHIP: GERMAN	
		;		
	FULL NAME OF THIRD INVENTOR:	Dimo HILLEBRAND		
in the second	INVENTOR'S SIGNATURE:		DATE:	
	RESTORNCE BOSENSE 29 Honow 15366	<u> OERMANY</u>	CITIZENSHIP: GERMAN	
	POST OFFICE ADDRESS: SAME AS AF	OVE		
	FULL NAME OF POURTH INVENTOR:	Peter BENDSKO	•	
:	ENVENTOR'S SIGNATURE:		DATE:	
	RESIDENCE: Imandetr. 32, Berlin 12623 C	ERMANY		
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PAGE 9/13 * RCVD AT 1/3/2006 4:37:41 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/27 * DNIS:2738300 * CSID:2128080844 * DURATION (mm-ss):04-00

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POWER OF ATTORNEY: As a named inventor, I hereby appoint

	Practioners Associated with the Customer Number:	27387		
	as my/our attorney(s) and/or agent(s) to prosecu Patent and Trademark Office connected therew		transact all bu	usiness in the
	The undersigned hereby authorizes the U.S. instructions from the Assignee of this application and Trademark Office regarding this application or agent and the undersigned.	n as to any action to be	taken in the U	Jnited States Patent
	DIRECT TELEPHONE CALLS TO: Bruce S. Londa (212) 808-07	<u>70</u> 0		
	FULL NAME OF SOLE OR FIRST INVENTO	R: Axel MEYE		
	INVENTOR'S SIGNATURE:		DATE:	
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	FULL NAME OF SECOND INVENTOR: H	elge TAUBERT		
	INVENTOR'S SIGNATURE:		DATE:	
	RESIDENCE: Wiese 14, Grossorner 06348 GE	RMANY	CITIZENSH	IP: GERMAN
	POST OFFICE ADDRESS: SAME AS ABOY	VE		
31	FULL NAME OF THIRD INVENTOR: Tim	no HILLEBRAND		
	INVENTOR'S SIGNATURE:	b.	DATE:	. 11. 2005
	RESIDENCE: Bogenstr. 29, Honow 15366 GE	RMANY DEX	CITIZENSH	IIP: GERMAN /
	POST OFFICE ADDRESS: SAME AS ABOV	VE		
400	FULL NAME OF FOURTH INVENTOR: P	eter BENDZKO		
•	INVENTOR'S SIGNATURE: RULL 5		DATE: 2	1.11.05
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500 FULL NAME OF FIFTH INVENTOR: Katharina KRÜGER	1 - 1 A com-
INVENTOR'S SIGNATURE: LORGE COMO UDI	DATE: 13, 11.05
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	:
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in the given	() () () () () () () () () ()	
		101215-174 Norris, McLaughlia & Marcus, P.A. Page 3 of 1
	FULL NAME OF FIFTH INVENTOR: Katharina KRUGER	
	INVENTOR'S SIGNATURE	DATE:
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POST OFFICE ADDRESS: SAME AS ABOVE	
FULL NAME OF SEVENTH INVENTOR: Manfred WIRT	H
INVENTOR'S SIGNATURE:	DATE:
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POST OFFICE ADDRESS: SAME AS ABOVE	